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\*\* CONTINUING DATA

\*\* FOREIGN APPLICATIONS

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/07/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	WA	DRAWING 10	CLAIMS 23	CLAIMS 7
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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## TITLE

Non-uniform passes per raster

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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